

FAST FACTS

The President's Malaria Initiative (PMI)

"One million last year alone died on the African continent because of malaria. And in the overwhelming majority of cases, the victims are less than 5 years old, their lives suddenly ended by nothing more than a mosquito bite. The toll of malaria is even more tragic because the disease itself is highly treatable and preventable ... the world must take action."

President George W. Bush
June 30, 2005, Washington, D.C.

PMI Results Highlights

Six million people have received lifesaving prevention or treatment services since the inception of PMI.

PMI's History, Goals, and Partners

- President George W. Bush launched PMI on June 30, 2005, to help control malaria, with the targeted goal of preventing 50 percent of malarial deaths in 15 of the worst-hit countries. This will be accomplished by reaching 85 percent of the most vulnerable people – children under 5 years of age, pregnant women, and persons living with HIV/AIDS – with proven prevention and treatment tools.
- Led by the U.S. Agency for International Development, PMI is a multi-agency U.S. Government partnership that includes the Department of Health and Human Services (Centers for Disease Control and Prevention) and the Department of State.
- PMI works with host countries in coordination with international partners, nongovernmental organizations, faith-based and community groups, and the private sector.

Program Areas

To prevent and treat malaria, PMI uses a comprehensive approach consisting of four key tools:

- **Spraying with insecticides ("indoor residual spraying," or IRS):** IRS is the timely spraying of an insecticide on the inside walls of homes. It is designed to interrupt malaria transmission by killing mosquitoes. PMI purchases spraying equipment and trains local people to conduct IRS campaigns.
- **Insecticide-treated mosquito nets (ITNs):** Bednets treated with insecticide have proven highly effective in preventing malaria. Consistently sleeping under an ITN can cut all-child mortality by 17 to 63 percent.¹
- **Lifesaving drugs:** Artemisinin-based combination therapies (ACTs) are the most effective and fast-acting drugs available for treating malaria. PMI purchases ACT drugs; establishes management and logistics systems for their distribution; and trains health workers in their use.
- **Intermittent preventive treatment for pregnant women (IPT):** More than 30 million African women become pregnant annually and are at risk for malaria. Giving at least two doses of sulfadoxine-pyrimethamine (SP) to pregnant women protects them against maternal anemia and low birthweight of the child. PMI provides these medicines and trains health workers to administer them.

¹ WHO publication: *Malaria and HIV/AIDS Interactions and Implications: Conclusions of a Technical Consultation*. 23–25 June 2004 (WHO/HIV/2004.8).

Target Countries and Funding

Angola, Tanzania, and Uganda – 1st round countries; PMI began in 2006.

Malawi, Mozambique, Rwanda, and Senegal – 2nd round countries; PMI to begin in 2007.

Benin, Ethiopia*, Ghana, Kenya, Liberia, Mali, Madagascar, and Zambia – 3rd round countries; PMI to begin in 2008.

- 2006: **\$30 million** for 1st round countries
- 2007: **\$135 million** for 1st and 2nd round countries
- 2008: **Projected \$300 million** for all countries
- 2009: **Projected \$300 million** for all countries
- 2010: **Projected \$500 million** for all countries

PMI Results Highlights

Angola

- Over 580,000 ACTs purchased
- More than 590,000 people protected and 350 spray personnel trained through December 2005 spraying campaign
- Over 800,000 free long-lasting ITNs (LLINs) distributed by PMI and partners to pregnant women and children

Tanzania

- 380,000 ACT treatments purchased for Tanzania
- Spraying campaign in Zanzibar protecting 1 million people
- Over 230,000 nets distributed by PMI and partners to pregnant women and children on Zanzibar islands

Uganda

- Approximately 290,000 pediatric ACT treatments purchased and being distributed in war-torn northern Uganda
- Over 480,000 people in Kabale district protected from malaria by IRS campaign; over 400 trained in IRS
- Over 220,000 free LLINs distributed to children and pregnant women in internally displaced person camps
- 500,000 nets re-treated with insecticides, improving their efficacy against malaria-carrying mosquitoes

Launch Activities: 2nd Round Countries

Malawi

- 165,000 LLINs to be distributed to Malawi's poorest of the poor, children under 5, and pregnant women

Mozambique

- 550,000 nets re-treated with insecticides, extending protection

Rwanda

- 500,000 doses of SP purchased and being distributed to pregnant women nationwide through clinics for preventive malaria treatment

Senegal

- 100,000 nets re-treated with insecticides, targeting pregnant women and children under 5

* One high-burden province